

Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix AZ 85007-2934
www.azliquor.gov
(602) 542-5141

FOR DLLC USE ONLY

Date payment received:

CSR initials:

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

This application must be returned to the Department of Liquor
(Notice: Allow 30-45 days to process permanent change of premises)

☐ Permanent change of area of service. **A NON-REFUNDABLE \$50 FEE WILL APPLY.** Specific purpose for change:

☒ Temporary change for date(s) of: 07/18/15 through 07/18/15 List specific purpose for change:
40 & 8 STATE CONVENTION (FRATERNAL ORG.) (FROM 8:00 A.M. UNTIL 2:00 P.M.)

1. Licensee's Name: WILSON KEITH NONE
Last First Middle

2. Mailing Address: 12 THEATER DRIVE, SIERRA VISTA, AZ. 85635-1565
Street City State Zip

3. Business Name: AMERICAN LEGION POST 52 License # 14020001

4. Business Address: 12 THEATER DRIVE, SIERRA VISTA, AZ. 85635-1565
Street City State Zip

5. Contact phone: (520) 459-6050 Business phone: (520) 459-6050

6. Email: kathreansmithp@gmail.com KathreanpSmith@gmail.com

7. Is extension of premises/patio complete?
☐ N/A ☐ Yes ☒ No If no, what is your estimated completion date? 07/18/15

8. Do you understand Arizona Liquor Laws and Regulations?
☒ Yes ☐ No

9. Does this extension bring your premises within 300 feet of a church or school?
☐ Yes ☒ No

10. Have you received approved Liquor Law Training?
☒ Yes ☐ No If yes, when does your Certificate expire? Date: 08/13/17

11. What security precautions will be taken to prevent liquor violations in the extended area?
CITY BARRIERS WITH TAPE AND SECURITY PERSONNEL PRESENT

12. **IMPORTANT:** ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.

☐ Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premise. List specific reasons for exemption:

Investigation Recommendation: ☐ Approval ☐ Disapproval by: _____ Date: ____/____/____

ⓈOBTAIN APPROVAL FROM LOCAL GOVERNING BODY BEFORE SUBMITTING TO THE DEPARTMENTⓈ

Ⓢ After completing the application, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

This change in premises is RECOMMENDED by the local Board of Supervisors, City Council or Designate:

(Authorized Signature)

(Title)

(Agency)

Date

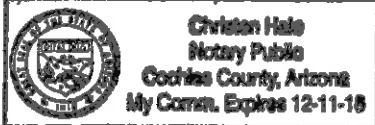
I, Kathleen Hellen Smith declare that I am the APPLICANT and, under penalty of
(Print full name)
perjury, making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

x Kathleen Hellen Smith Manager 6/22/15 (520)458-6050
(Signature) Title/ Position Date Phone #

The foregoing instrument was acknowledged before me this 22 June 2015
Day Month Year

State Arizona County of cochise

My Commission Expires on: Dec 11, 2018



Date

Christian Hale

Signature of Notary Public

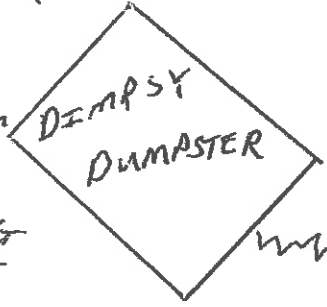
Investigation Recommendation: ☐ Approval ☐ Disapproval by: _____ Date: ____/____/____

Director Signature required for Disapprovals _____ Date: ____/____/____

STREET

CHAIN LINK FENCE

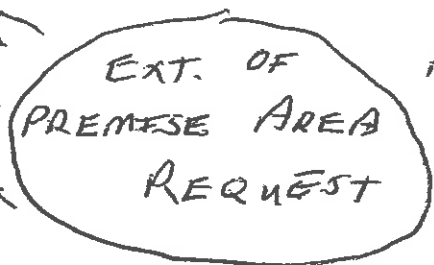
XXXXXXXXXXXXXXXXXXXXXXXXXXXX
← TAPE →



AMERICAN LEGION
BUILDING

12 THEATER DR.
SIERRA VISTA, AZ
85635

CITY STR
BARRIERS
PARKING LOT



ANNEL
DOORS

TAPE

HALL
DOOR

CITY STR.
BARRIERS

TAPE

PARKING LOT

MAIN
ENTRANCE